

**DETERMINATION AND FINDINGS  
FOR  
SOLE SOURCE PROCUREMENT**

<b>USING AGENCY:</b>	Department of Corrections
<b>CONTRACTING AGENCY:</b>	Office of Contracting and Procurement
<b>CONTRACT NO.:</b>	CW23695
<b>CAPTION:</b>	Comprehensive Health Care Services
<b>CONTRACTOR:</b>	Unity Health Care, Inc.

**FINDINGS**

**1. AUTHORITY:**

D.C. Official Code §2-354.04, 27 DCMR 1304, 1700, 1701; 27 DCMR 2005.6(b)

**2. MINIMUM NEED:**

The Department of Corrections of the District of Columbia (DOC) has an immediate need for full continuum health care service to provide comprehensive medical and mental health services to an estimated population of 3,000 inmates housed in the Central Detention Facility (CDF), 1901 D Street, SE, the Correctional Treatment Facility (CTF), 1901 E Street, SE, and four (4) Community Correctional Centers under the Community-Oriented Correctional Health Care (COCHC) model.

**3. ESTIMATED FAIR AND REASONABLE COST:**

The estimated fair and reasonable price for the contract extension is \$11,925,000.00 from October 1, 2013 through March 31<sup>st</sup>, 2014.

**4. FACTS WHICH JUSTIFY A CONTRACT EXTENSION:**

Unity Health Care, Inc., (Unity) was awarded Contract No DCFL-2006-D-6001 in 2006 for three-year base period with two one-year options. In anticipation of the expiration of this contract, in 2011 the Office of Contracting and Procurement (OCP) issued a Request for Proposal (RFP), DCFL-2011-R-1001, to select a new contractor.

During this procurement process, the leadership at the Department of Corrections changed and re-evaluated DOC's inmate healthcare requirements. Following this process, the Interim Director of DOC advised OCP that DOC needed more time and expertise to re-examine the minimum needs set forth in the RFP and requested OCP to extend the current contract and cancel the RFP. The RFP was cancelled on May 13, 2011 and a sole source extension, to Unity Healthcare, was awarded for the period of October 1, 2011 to September 30, 2012.

DOC subsequently engaged the services of a consulting firm, Public Consulting Group, Inc. to advise them and make recommendations as to how DOC could improve inmate healthcare services and reduce costs. This engagement took substantially more time than expected and the contract with Unity had to be extended again, through September 30, 2013.

DOC developed a new Statement of Work based on the finding and recommendations of the Public Consulting Group, Inc. A new solicitation was advertised in the Washington Times on July 5<sup>th</sup>, 2013 and simultaneously released on the OCP's E-Sourcing module, with a closing date of August 19, 2013. However, the number of questions OCP received from prospective offerors pertaining to the solicitation and the amount of time needed to address these questions warranted an extension of the solicitation closing date. An extension to the solicitation was posted on OCP's E-Sourcing Module on August 8, 2013 with a closing date of September 9, 2013. Accordingly, the anticipated date of award is December 31, 2013.

A comparative analysis of Medical Care cost for Washington-Baltimore, DC-MD-VA-WV was conducted and the findings are as follows. In 2008, Medical Care cost increased by 3.69%, 2009 was 4.40%, 2010 was 7.39%, 2011 was 4.23%; the data for 2012 is not yet available. Further analysis showed that the contract that was signed by the District dated July 19, 2006; the average population of the inmates served in 2006 to 2009 was 3,090; 2010 was 3,034; 2011 was 3,100; 2012 was 2,630 and 2013 is 2,780. The cost of medical services for the inmates in 2006 to 2009 (three base years) was \$84,831,907.00. Option Year One, October 1, 2009 to September 30, 2010, the cost was \$28,521,422.98; Option Year Two, October 1, 2010 to September 30, 2011, the cost was \$24,451,535.00. The cost of the extending the contract from October 1, 2011 to September 30, 2012 was \$24,451,535.00. Additionally, the cost of extending the contract from October 1, 2012 to September 30, 2013 is \$23,600,580.00. The reduction in cost may be attributed to the decline in inmates' population and reduction in the percentage of medical cost in 2011.

The District must continue to provide healthcare services during this period and allow for a sixty (60) day transition period. For this reason, the current contract must be extended from October 1, 2013 through March 31, 2014.

##### **5. CERTIFICATION BY AGENCY HEAD OR DESIGNEE**

I hereby certify that the above findings are correct and complete to the best of my knowledge and belief.

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Thomas N. Faust  
Director

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Date

**6. CERTIFICATION BY CONTRACTING OFFICER**

I have reviewed the above findings and certify that they are sufficient to justify the use of the sole source method of procurement under the cited authority.

The notice on intent to award a sole source contract was posted on OCP website and no responses were received. I recommend that the Chief Procurement Officer approve the use of the sole source procurement method for this proposed contract.

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O'Linda Fuller, MBA, CASA  
Contracting Officer  
Office of Contracting and Procurement

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Date

**DETERMINATION**

Based on the above findings and in accordance with the cited authority, I hereby determine that it is not feasible or practical to invoke the competitive solicitation process under D.C. Official Code § 2-354.04 Sec (a)(b)(c), DCMR 1700 and D.C. Law 18-371. Accordingly, I determine that the District is justified in using the Sole Source Method of Procurement. In addition it is determined that this method is in the best interest of the District.

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James D. Staton, Jr.  
Chief Procurement Officer  
Office of Contracting and Procurement

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Date